INSTRUCTIONS: Submit an original to the Richmond Office VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER Date of Application: **SERVICES MEAT AND POULTRY SERVICES** Individual _____ **Application for State Meat and Poultry Inspection** Corporation/Association Name and Mailing Address of Applicant: Type of Application: UPDATE **CHANGE OF CHANGE OF** NAME NEW ___ ADDRESS OWNER **CHANGE** FEDERAL ID #: Location of Plant (if different from above): Area Code and Telephone Number: Other names (if any) under which business will be conducted. Name and address of Tenants (if any) Requiring Inspection at (If other names are used, submit a copy of document showing This Plant registration of such names with the proper authorities). Days per Hours per Hours per day Month and year when plant will be ready to year plant week plant plant will operate under inspection program will operate will operate operate ESTIMATED NUMBER OF ANIMALS TO BE SLAUGHTERED WEEKLY WHEN INSPECTION IS INAUGURATED Cattle Calves Sheep Goats Swine Guineas Young Chickens **Mature Chickens** Ducks Turkeys Geese ESTIMATED WEEKLY VOLUME OF FRESH MEAT OR READY-TO-COOK POULTRY TO BE DISPOSED OF IN COMMERCE Beef Veal **Lamb or Mutton** Goat Pork lbs. lbs. lbs. lbs. lbs. Young Chicken Mature Chicken Turkey Goose Duck Guinea lbs. lbs. lbs. lbs. lbs. ESTIMATED VOLUME TO BE PREPARED AND PROCESSED WEEKLY WHEN INSPECTION IS INAUGURATED Total Pounds to be Disposed of **END PRODUCT** in Commerce **Total Pounds to be Processed** Processed meats, sausage, hamburger, etc. Sliced products (bacon, ham, beef, sausage, etc.)

Edible fats processed, including

oleomargarine

Fabricated steaks, meat and poultry dinners and pies, and poultry rolls and roasts, etc.					
Canned meat or poultry, all types except equine					
Boned or cut fresh meat poultryboth					
Other (specify)					
List all persons responsibly connected with the applicant. Include all partners, officers, directors, holders or owners of 10 per centum or more of voting stock, and employees in a managerial or executive capacity in the business. Notify the Officer-in-Charge of any changes in the listing given.					
NAME	TITLE	CITY, STATE, AND ZIP CODE OF MORE THAN 109		MORE THAN 10% OF VOTING STOCK	
Name of each person listed above who has been convicted in any federal or state court of (1) any felony, or (2) more than one violation of any law. Other than a felony, based upon the acquiring, handling, or distributing of unwholesome, mislabeled, or deceptively packaged food or upon fraud in connection with transactions in food. Include the nature of the crime, the date of conviction, and the court in which convicted.					
List each conviction against the applicant in any federal or state court of (1) any felony, or (2) more than one violation of any law, other than a felony, based upon the acquiring, handling, or distributing of unwholesome, mislabeled, or deceptively packaged food or upon fraud in connection with transactions in food. Include the nature of the crime, the date of conviction, and the court in which convicted.					

AGREEMENT AND CERTIFICATION: If inspection is granted under this application, I (We) expressly agree to conform strictly to the Virginia Meat and Poultry Products Inspection Act and all regulations promulgated thereunder. I CERTIFY that all statements made herein are true to the best of my knowledge and belief. This is an EQUAL OPPORTUNITY PROGRAM. If you believe you have been discriminated against because of race, color, religion, sex, national origin, age, or handicap, write immediately to the Secretary of Agriculture or the Administrator, FSIS, Washington, DC 20250.				
Typed name of person signing application:				
Signature and title of owner, partner, or authorized officer making this application:				
TO BE COMPLETED BY VDACS				
DATE RECEIVED	DATE REVIEWED	SIGNATURE OF MEAT AND POULTRY SERVICES PROGRAM MANAGER		
Program Review Compliance Approval				